Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10720177

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS				il		1181 27	ļ.	RATE	FEE	0n 1	RATE	FEE	
					131145			BASIC FEE	 	-			
FOR			NUMBER FILED			NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			(minus 20=					X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS				inus 3 =	* 0			X43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column			olumn 2	•	TOTAL		OR	TOTAL	770	
	С	LAIMS AS A) - PAR	PART II			-			OTHER	THAN		
		(Column 1)		(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=.		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENI	CLAIM			+145=		OR	+290=		
•								TOTAL		OB	TOTAL		
								ADDIT. FEE	<u>.</u>	JOH,	ADDIT. FEE		
		(Column 1) CLAIMS	T	(Colun		(Column 3)	1 [ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=.		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						[]]	4.45			. 2000-	· ·	
							L	+145=		OR	+290=		
	·			A	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE					
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	· ·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=		
** !	f the "Highest Nur	mber Previously Pa	aid For IN THIS	S SPACE is	s less than	n 20, enter "20."	. A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE		
		mber Pr viously Pa nber Previously Paid					r foui	nd in the app	ropriate box	in col	umn 1.		